

CLINICAL CONGRESS

AMERICAN COLLEGE OF SURGEONS

news

Founded by Surgeons of the United States and Canada, 1913

ATLANTIC CITY, N. J., TUESDAY, OCTOBER 15, 1968

Mississippi Investigators Describe Built-In Valve To Assist Heart in Failure

Investigations dealing with pulmonary and cardiac problems, infection, burns, wound healing, orthopedic surgery, and various aspects of transplantation, were presented yesterday among the first group of a total of 263 research reports forming the popular "Forum on Fundamental Surgical Problems."

Sponsored by the College's Forum Committee under the chairmanship of H. William Scott, Jr., these sessions will be held each day through Thursday in several rooms of Convention Hall and in other Atlantic City hotels. All Forum papers are published in *Surgical Forum*, Vol. XIX, now on sale for \$3.00 at Convention Hall near the registration desk.

Here is a sampling of what young surgeons from throughout the nation presented to the Congress at Monday's Forum sessions.

Built-in Heart Assist

Tetsuzo Akutsu, Jackson, of the University of Mississippi Medical Center, described a permanently built-in valve which is implanted between the ascending aorta and descending aorta for use with a heart assist in case of cardiac failure. He said the flat, elliptic shape valve simply forms a tube when not in use. It has no grooves or pockets to encourage clot formation.

After a patient recovers enough not to need further help from the heart assist, the air-driven device is left implanted as an aortic graft. When the assist pumping is needed again, it can be re-started immediately.

Associated with him in the work are Hiroyuki Takagi and Wan-fa Cheng.

Plastic Isolator for Surgery

Another report said that a lower incidence of infected wounds has been achieved through a flexible plastic isolator system for human surgery. Seymour Alpert, Bronx, N.Y., of the Albert Einstein College of Medicine, reported that among 71 patients undergoing major abdominal surgery in an isolator, only three developed wound infection (3.7%). Among 48 similar patients undergoing major abdominal surgery in a conventional operating room, seven developed wound infection (14.6%).

Both groups were operated on by the same surgeons and cared for by the same surgical and nursing staffs on the same wards.

Working with Dr. Alpert in the study were Theodore Salzman, Maureen Din-

College to Step Up Public Information Activities



Regent Robert M. Zollinger presides at Friday's meeting on communications. Others are (from back) Heinz R. Kuehn, Charles W. McLaughlin, Jr., Regents C. Rollins Hanlon and John D. Martin, Jr. Dr. McLaughlin is Governors' chairman, Mr. Kuehn, administrative associate, A.C.S., in charge of communications.

The Board of Regents at its meeting here last Saturday approved a recommendation of the communications committee to develop a basic public information program for the College.

The program will include the development over the next few years of a series

of public information publications describing the scope and advancements of modern surgery; the production of public service messages for television, and the production of a sound-and-color slide film on the dimensions of modern surgery.

erman, Judith Clark and Stanley M. Levenson.

From one to 30% of operative patients will develop a wound infection, depending on the type of operation, Dr. Alpert said.

The surgical isolator reduces sources of infection from a multitude of possibilities to two: bacteria in the patient's skin, and bacteria contained within the organ being operated on. Experience with the isolator shows the contribution of the skin to be small, but that of the organ, particularly the gastro-intestinal and urinary tracts to be large.

Breathing and Oxygenation

Although both continuous positive pressure breathing (CPPB) and intermittent positive pressure breathing (IPPB)

prolong survival in experimental respiratory distress syndrome, the former maintains better oxygenation, according to another investigation.

David G. Ashbaugh and Takeshi Uzawa, Denver, of the University of Colorado Medical Center, said the experimental work confirms clinical observations.

The syndrome has assumed great clinical significance in the past few years, particularly in Vietnam where soldiers are dying of pulmonary problems following nonthoracic trauma, said Dr. Ashbaugh.

Catheter Extracts Lung Clots

R. Darryl Fisher, Thomas J. Fogarty and Stanton P. Nolan, of the National Heart Institute, Bethesda, Md., reported that a new method of extracting clots from lungs of experimental animals by means of a catheter appears feasible.

If it can be applied clinically, it would remove the present need for a heart-

(Continued on Page 2)

MESSAGES

To Leave and Pick Up Messages
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Convention Hall

Forum Scientists Investigate Many Problems

(Continued from Page 1)

lung bypass or temporary interruption of circulation, procedures that are often poorly tolerated by critically ill patients.

The large-bore silastic catheter has been tried out on dogs, both with and without opening the thoracic cage. The catheter is manipulated into the pulmonary artery and the clots are extracted by gentle flushing and suctioning.

No significant changes in blood flow was produced by inserting the catheter into the pulmonary artery and its branches.

New Laryngectomy Procedure

A new procedure for constructing a speaking tube for the patient who undergoes laryngectomy and cannot learn esophageal speech or use an electronic voice box was described by Robert M. Snider of the University of Mississippi Medical Center, Jackson. He said the new alternative is called the Assai procedure for its Japanese originator.

The method involves standard laryngectomy except for formation of two openings into the windpipe instead of one. Two more procedures at six-week intervals make it possible for the patient to exhale through the tube, putting it into vibration and making sound which can be formed into speech.

The procedure, which creates a vibrating mechanism from the patient's own tissue, should be reserved for those who can't be helped by standard procedure, said Dr. Snider, since the procedure is complicated. Unfortunately, despite its benefits, preoperative irradiation in advanced cases of laryngeal cancer seems to retard rehabilitation by the Assai procedure, said Dr. Snider.

Nonsurgical Correction of Pacemakers

Experimental work at the University of Pennsylvania, showing that it is now

possible to obtain correction of defects of implanted pacemakers without operation, was the subject of another report.

By using rechargeable batteries and implanted spare components that are activated externally, the incidence of reoperative pacemaker surgery can be significantly reduced, G. Frank O. Tyers and Robert A. Foresman, Philadelphia, told Forum listeners.

While pacemakers have dramatically rehabilitated individuals crippled with heart irregularity, failure within a few months of implantation is still common, they said, and function beyond two years is the exception.

Almost all causes of pacemaker failure are correctable by major or minor surgery but some patients refuse reoperation, even when advised of the danger of sudden death. In addition, infection in the scarred reoperative site is a major hazard.

A pacemaker with a spare, inactive lead attached to the heart during the original surgery has been devised. By use of a magnetic switch technique, this spare could be activated in the event of a lead failure. Other changes can make possible increasing power output in case of increasing heart muscle resistance or decreasing battery output.

Testing of a clinical prototype that is rechargeable by inductive coupling is underway in animals. This unit features external monitoring of battery voltage and two independent magnetically ex-

changeable power sources, each with a self life of greater than two years.

Computer Calculates Cardiac Output

A simplified method for calculating cardiac output values in patients or in research, using the computer to calculate the logarithms and straight lines, has been developed by T. E. Williams, Jr., and his associates at Northwestern University Medical School, Chicago, according to another Forum report presented yesterday.

Hand calculation of the cardiac output requires four steps: reading the data; plotting the data on semilogarithmic paper to determine the slope of the exponential decay lines; replotting these values to correct the original curve for recirculation; and measuring the area under the curve by planimetry. The digital computer handles the last three steps and all subsequent calculation.

This removes the need for a one-to-three month training period for a technician. The method can be learned in a week, Dr. Williams said.

The amount of computer time used varies with the machine. An IBM 1800 processes about one determination every five seconds. A larger machine such as the CDC 6400 will compute at least 400 determinations a minute. At the usual charge of \$8 a minute for computer time at Northwestern, the cost is about two cents per determination over and above reading and keypunching cost, Dr. Williams noted.

Associated with Dr. Williams in the development are René Arcilla, Marc I. Rowe, Steven Deller and F. John Lewis.

Regents Plan Conference To Chart College's Future

The Board of Regents will meet in Phoenix, Ariz., Jan. 23-26, 1969, to examine in depth the College's current state of affairs and to make long-range plans for the organization's future. In seven concentrated sessions, to be held at the Camelback Inn, the Regents, officers of the College and the Board of Governors, and a number of invited guests, will discuss surgical education, continuing education, the international role of the College, interspecialty problems, the College's position on governmental programs, internal affairs, such as finances and personnel, and other subjects.

The Regents' planning session was approved by the Board at its meeting here last Saturday. In other actions the Board:

— Approved a recommendation to establish in honor of John H. Gibbon, Jr., either an endowed Clinical Congress lectureship on cardiovascular surgery, or a traveling fellowship for foreign surgeons.

— Accepted an invitation from Luther L. Terry for the College to join the National Interagency Council on Smoking and Health.

— Approved a contribution of \$750 to the National Society for Medical Research.

— Approved participation of the College in a National Council of Obstetrics-Gynecology now being organized by the American College of Obstetricians and Gynecologists.

— Approved in principle a proposal to raise Fellowship dues beginning in 1970, but deferred action on a specific amount until next year and after consultation with the Board of Governors.

— Reappointed Reed M. Nesbit for a fourth three-year term as commissioner of the Joint Commission on Accreditation of Hospitals.

— Re-elected William P. Longmire, Jr., for another five-year term as director of The Franklin H. Martin Memorial Foundation, publishers of Surgery, Gynecology, and Obstetrics.

— Appointed as ophthalmology representatives on the Graduate Education Committee Joseph A. C. Wadsworth, Durham (to succeed Frank W. Newell) and Irving H. Leopold (to succeed F. Phinizy Calhoun, Jr.).

— Appointed J. Englebert Dunphy a member of the College's International Relations Committee.



Darryl Fisher shows catheter for pulmonary emboli removal (p. 1) as Andrew McBride looks on.

Heart Transplant Among Tonight's Spectaculars



The donor heart is sutured into place and the lateral walls of the left atria are joined by continuous suture in this still from Denton A. Cooley's new documentary "Transplantation of the Human Heart," one of 17 films to be shown tonight at 7:45 in Convention Hall Ballroom at Symposium on Spectacular Problems in Surgery. This color film was assembled from footage taken at several of Dr. Cooley's heart transplants.

Andrew McBride Heads Surgeons Working With Science Writers

Surgeons taking turns in the press room this week to help participants and science writers interpret news stemming from the Congress are headed by Andrew F. McBride, Paterson, N. J. Others are:

George L. Becker, Jr., Paterson; Alfred A. Alessi, Hackensack; Lester A. Barnett, Long Branch; Robert A. Cosgrove and Kenneth Judy, of Jersey City; John H. Flanagan, Spring Lake; Elmer L. Grimes and Eugene H. Kain, Camden; Peter J. Guthorn, Neptune; Christine E. Haycock, Newark; Clement M. Jones, Bayonne; W. Franklin Keim, Montclair; Victor Parsonnet, Millburn; D. Barton Stevens, Princeton; Felix H. Vann, Englewood; and Arthur T. Willets, Summit.

Pennsylvanians working with their colleagues and science writers will be John H. Updegrove, Easton, and Ralph C. Wilde, Pittsburgh.

John L. Bach, Chicago, medical public relations consultant, will join A.C.S. staff members as assistant in the press room.

In spite of the Apollo shot at Cape Kennedy, more than 75 science writers and editors are expected to register in the press room.

Approximately 100 doctors will be called in for interviews.

St. Vincent's at Bridgeport

William H. Curley is arranging a Dutch treat cocktail party for doctors and guests from St. Vincent's Hospital, Bridgeport, Conn. It will be in the Pine Room, Traymore, from 5:30 to 7:30, Wed., Oct. 16.

Sydenham Society

The Surgical Society of Sydenham Hospital will meet today for cocktails in the Hotel Claridge suite of Dr. and Mrs. Daniel F. Casten. All friends invited.



"NOT THE HEART!
TELL THEM NOT TO SHOOT THE HEART!"

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Motion Pictures Tuesday

Trauma Special

Convention Hall, Rooms H and J
9 a.m. - 12 noon

Various Subjects

Convention Hall, Rooms H and J
1:30 p.m. - 5:00 p.m.

Aerosol Tissue Adhesive Spray in Surgery of Internal Organs

Teruo Matsumoto, Washington
K. C. Pani, Washington
Robert M. Hardaway, Washington

Fiberoptic Cine-endoscopy of the Bladder and Urethra.

Irving M. Bush, Chicago
J. Lester Wilkey, Chicago
Fedele Morelli, Chicago

Sleeve Resection, Right Main Bronchus

Donald L. Paulson, Dallas
Harold C. Urschel, Jr., Dallas
J. Judson McNamara, Dallas

Ampullary Fibrosis

Clarence J. Schein, Bronx
Thomas C. Beneventano, Bronx

Lymphangiosarcoma of the Swollen Extremity—Regional Chemotherapy

William R. Nelson, Denver

Jejunal Interposition

Albert Wilson Harrison, Beaumont, Texas
Ed. A. Hanna, Houston
John R. Derrick, Galveston

Bioassay Diagnosis of Ulcerogenic Z-E

Tumor with Total Gastrectomy

James D. Hardy, Jackson
Bertie J. Wilken, Jackson
J. T. Davis, Jackson

Revascularization for Chronic Intestinal Ischemia

Fred R. Plecha
Walter J. Pories
Wright-Patterson A.F.B.

Technique for Right Hemicolectomy

John L. Madden, New York

Giant Fibroma of the Mesentery

Earl Belle Smith, Pittsburgh

Surgical Treatment of Malrotation of the Intestines

Jordan J. Weitzman, Los Angeles
William H. Snyder, Jr., Los Angeles

Ophthalmic Surgery

Convention Hall, Room 11
2:00 p.m. - 4:00 p.m.

Spectacular Problems in Surgery

Convention Hall, Ballroom
7:45 p.m. - 10:30 p.m.

Three Newly Appointed Nominating Committees to Meet Wednesday

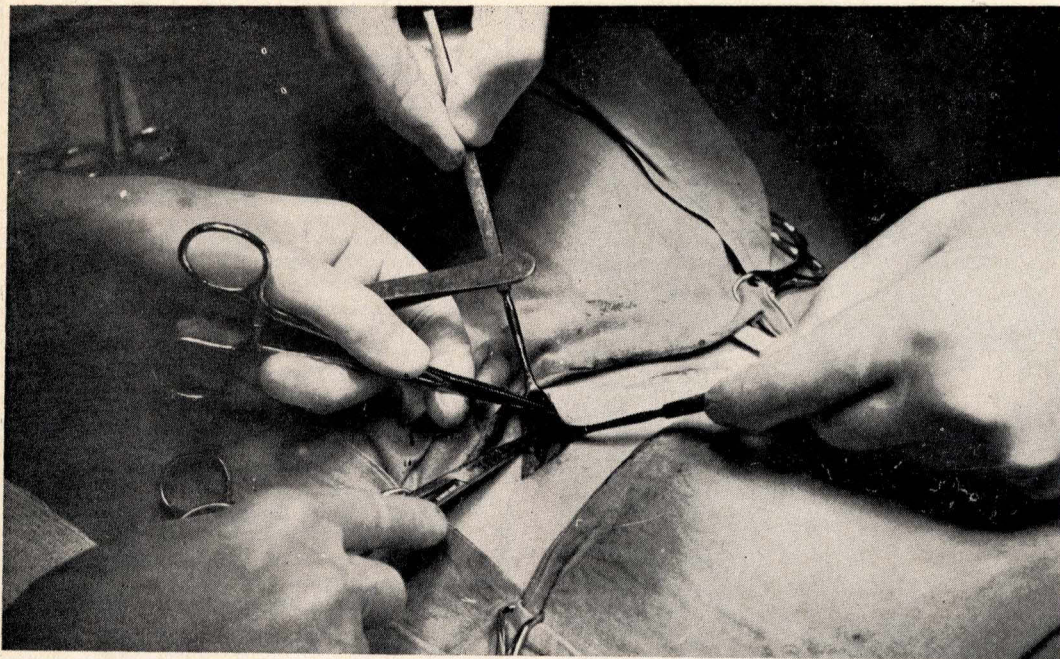
Three committees will meet jointly on Wed., Oct. 16, to nominate various officials. They will report to the Fellows at their meeting on Thursday. This year the committees are comprised of these Fellows:

Nominating Committee of the Board of Governors — James R. Watson, Pittsburgh, chairman; William C. Cantey, Columbia, S. C., vice chairman; Bentley P. Colcock, Boston; Harold L. Gainey, Kansas City, Mo.; and Arthur C. Pattison, Pasadena.

Nominating Committee of Fellows — J. Hartwell Harrison, Boston, chairman; Allen M. Boyden, Portland, Ore.; James G. Donald, Mobile; Robert A. L. Macbeth, Edmonton; and Raleigh R. White, Temple, Tex.

Advisory Committee on Nominations for the Board of Regents — James T. Priestley, Rochester, Minn., chairman; Howard A. Patterson, New York; and Walter C. MacKenzie, Edmonton.

CINÉ FILMS BEGIN THIS MORNING



Rowena Spencer, New Orleans, divides the round ligament, leaving the proximal portion attached to the hernia sac in the Ciné Clinic film "Repair of Inguinal Hernia in Infancy" to be presented Wednesday for the first time. The world-famed pediatric surgeon will be on hand to narrate the film, produced by Davis & Geck for this meeting. William B. Kiesewetter, Pittsburgh, will discuss the work.

Specific methods used in the assessment and treatment of the critically ill patient are illustrated in the first of this year's series of Ciné Clinic films which begin this morning at 8:30 in Convention Hall. The opener, entitled *Intensive Care in Critical Illness*, shows the work of Lawrence G. Hampson and Fraser N. Gurd, Montreal.

The second in this morning's group of documentaries produced for the College by Davis & Geck, Div. of American Cyanamid Co., Danbury, Conn., will be *Initial Care of Civilian and Military Injured*. In this work by Ben Eiseman, Henry Swan and Marvin Pomerantz, Denver, early management of the severely injured Marine combat casualty in Vietnam is compared with equivalent

care given the severely injured civilian at the Denver General Hospital.

Tracheostomy, amount of intravenous sodium bicarbonate, and proper fluid to be given until type-specific blood is available are discussed by the Denver surgeons.

Other Cinés in today's section demonstrate the technique of mechanical support of ventilation; depict location, detection and control of bacteria in the operating suite; describe the surgical management of an 80-year-old woman with gastric ulcer; and depict the evaluation and treatment of carcinoma of the thyroid in a child with bilateral lobe involvement, cervical lymphnode metastases and tracheal invasion.

Air Force Clinical Surgeons

Society of Air Force Clinical Surgeons will have informal social hour and buffet for members, guests and other Air Force surgeons at 1900 hours, Wed., Oct. 16, Rooms 225-226, Crillon Motel.

The Carolinians Meet Today

University of North Carolina surgical alumni (no girls?) will have a reunion today—Tuesday—from 6 to 8 p.m., at the Claridge in Suite 1616-17, says Colin G. Thomas, Jr., Chapel Hill.

Dennis Society Meets at 5 p.m.

The Clarence Dennis Society will have cocktails in the Manor Room, Shelburne, this afternoon at 5.

Michael Reese Luncheon

Attending physicians, alumni and friends of Michael Reese Hospital will lunch together Wed., Oct. 16, at 12

noon in the Ozone Room, 8th floor, Dennis, Richard Shapiro, Chicago, says.

New York Hospital Graduates

Dr. and Mrs. Preston A. Wade invite New York Hospital graduates for cocktails in their room at the Dennis today at 5:30.

Vermonters Will Have Cocktails

The Vermont Chapter will gather for cocktails in Convention Room A, the Crillon, Pacific & Indiana Aves., Wed., Oct. 16, at 6 p.m. President Robert P. Darrow, Rutland, told the *News* about this party.

Bronx Chapter in the Fjord at 6

The Bronx Chapter will have cocktails in the Fjord Room at the Dennis at 6 p.m., Tues., Oct. 15. Six o'clock is change from hour given in Monday's *News*.

Helen Taussig to Join Surgeons on Today's Telecasts from Baltimore

A craniotomy on a 30-year-old white, right-handed male is to be performed at 10 a.m. today in the first of three procedures to be televised by Smith Kline & French Laboratories from the Johns Hopkins Hospital, Baltimore.

For four years A. Earl Walker's patient has had episodes of loss of consciousness lasting from a few seconds to several minutes. He has one or two attacks a week, in spite of dilantin, mysoline mebroin and tegretol. When 16 the man was hit by a car and was unconscious for an unknown period. A left temporal lobectomy is planned.

Vincent L. Gott plans to repair tetralogy of Fallot at 2 p.m., using cardiopulmonary bypass. His patient is a 24-year-old man who as a child was cyanotic and at seven years underwent a Blalock-Taussig shunt. He has not been able to work during the past year because of fatigue. The man has a systemic pressure in his right ventricle and severe infundibular and valvular stenosis.

Helen Taussig will join Dr. Gott in discussing this case.

At 3:30 p.m., Robert A. Robinson plans an anterior cervical fusion.

His patient is a 54-year-old white male who in 1966 had a partial laminectomy at C5-C6 for protruded disc. Meanwhile discomfort in the neck and numbness bilaterally in the thumb and index fingers have gradually increased.

Noer to Give Scudder Oration

Rudolf J. Noer, professor and head of the department of surgery, University of Louisville School of Medicine, will deliver the Scudder



DR. NOER

Oration on Trauma this afternoon at 1:30 p.m. in Rooms F and G, Convention Hall. His topic will be "Acute Injuries of the Liver."

Immediately following his oration, the Symposium on Trauma will be held in the same rooms. System support in

critical injury will be discussed by Moderator Fraser N. Gurd, Montreal, and seven other authorities.

Dr. Noer is an exponent of treating serious injuries in the operating room initially, using the department as a sorting area. In this respect the emergency department at the Louisville General differs from most other hospitals, inasmuch as no critical injuries are treated there.